Summary of Safety and Effectiveness StealthStation® System Three Dimensional C-Arm Interface

I. Manufacture:

Medtronic Surgical Navigation Technologies 826 Coal Creek Circle Louisville, CO 80027 USA Telephone Number: (720) 890-3200 Fax Number: (720) 890-3500

II. Contact:

Victoria G. Rendon Clinical and Regulatory Affairs Associate Medtronic Surgical Navigation Technologies

III. Product Name/ Classification Name:

Product Name: StealthStation® System Three Dimensional C-Arm Interface

Classification Name: Stereotaxic Instrument (21 CFR 882.4560)

Classification Panel: 84 HAW

IV. Date Summary Submitted

July 22, 2002

V. Description of Device Modification:

This submission describes updates made to the StealthStation® System to include an interface that enables the StealthStation® System to cohesively communicate with a Three Dimensional C-Arm.

VI. Substantial Equivalence:

The StealthStation® System Three Dimensional C-Arm Interface was shown to be substantially equivalent to the StealthStation System cleared in previous 510(k)'s. As required by risk analysis, all verification and validation activities were performed by designated individual(s) and the results demonstrated substantial equivalence.

VII. Indications For Use:

The indications for use for the StealthStation® System Three Dimensional C-Arm Interface are identical to the StealthStation® System indications for use. The indications for use are as follows:

The StealthStation® System is intended as an aid for precisely locating anatomical structures in either open or percutaneous procedures. The StealthStation® System is indicated for any medical condition in which the use of stereotactic surgery may be appropriate, and where reference to a rigid anatomical structure, such as the skull, a long bone, or vertebra, can be identified relative to a CT or MR based model or fluoroscopy images of the anatomy.

Example procedures include, but are not limited to:

Cranial Procedures:

Spinal Procedures:

Cranial Biopsies

Spinal Implant Procedures, such as Pedicle Screw

Placement

Tumor Resections

Craniotomies/ Craniectomies

Orthopedic Procedures:

Skull Base procedures

Total Knee Arthroplasty (Primary and Revision)

Thalamotomies/Pallidotomies

Pituitary Tumor Removal

CSF Leak Repair

Unicompartmental Knee Arthroplasty

ENT Procedures:

Transphenoidal Procedures

Intranasal Procedures

Orbital Decompression Procedures

Optic Nerve Decompression Procedures

Polyposis Procedures

Endoscopic Dacryocystorhinostomy

Encephalocele Procedures

Sinus procedures, such as Maxillary Antrostomies, Ethmoidectomies, Sphenoidotomies/Sphenoid

Explorations, Turbinate Resections, and Frontal Sinusotomies



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

AUG 1 4 2002

Ms. Victoria G. Rendon Clinical and Regulatory Affairs Associate Metronic Surgical Navigation Technologies 826 Coal Creek Circle Louisville, Colorado 80027

Re: K022414

Trade/Device Name: Stealthstation System Three Dimensional

C-Arm Interface

Regulation Number: 882.4560

Regulation Name: Stereotaxic Instrument

Regulatory Class: II Product Code: HAW Dated: July 23, 2002 Received: July 24, 2002

Dear Ms. Rendon:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 21 CFR Part 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours,

Celia M. Witten, Ph.D., M.D.

Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

Page 1

510(k) Number (if known):	2414
Device Name: StealthStation® System Three Dimensional C-Arm Interface	
or percutaneous procedures. The StealthStathe use of stereotactic surgery may be appro-	an aid for precisely locating anatomical structures in either openation System is indicated for any medical condition in which opriate, and where reference to a rigid anatomical structure, such e identified relative to a CT or MR based model or fluoroscopy
Example procedures include, but are not limited to:	
Cranial Procedures: Cranial Biopsies Tumor Resections Craniotomies/ Craniectomies Skull Base procedures Thalamotomies/Pallidotomies Pituitary Tumor Removal CSF Leak Repair	Spinal Procedures: Spinal Implant Procedures, such as Pedicle Screw Placement Orthopedic Procedures: Total Knee Arthroplasty (Primary and Revision) Unicompartmental Knee Arthroplasty
ENT Procedures: Transphenoidal Procedures Intranasal Procedures Orbital Decompression Procedures Optic Nerve Decompression Procedures Polyposis Procedures Endoscopic Dacryocystorhinostomy Encephalocele Procedures Sinus procedures, such as Maxillary Antrost Explorations, Turbinate Resections, and Fro	omies, Ethmoidectomies, Sphenoidotomies/Sphenoid ntal Sinusotomies
(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED) Concurrence of CDRH, Office Of Device Evaluation (ODE) Prescription Use (Per 21 CFR 801.109) (Division Sign-Off) Division of Ceneral, Restorative and Neurological Devices	

510(k) Number <u>KOZZ414</u>